## SAMPLE LETTER

(Type onto your letterhead)

Date:	
c/o Ma 72 Stat	Emergency Response Commission Line Emergency Management Agency Lee House Station Lea, Maine 04333-0072
To all	concerned parties:
Regard	ling (Facility name) (Facility location and mailing address)
Report	ing year
or Extr	icility is not subject to chemical inventory reporting requirements for hazardous chemicals remely Hazardous Substances for the following reason: (Check applicable item and y chemical)
	After careful investigation and audit we find there are no chemicals at this facility above reporting thresholds
	The quantity in inventory never exceeded the Threshold Planning Quantity for (Chemical name)
	We have ceased using the chemical and removed it from inventory effective(Date) (Chemical name)
	acility is not subject to Toxic Chemical Release Reporting for the following reason(s): all that apply to you.)
	This facility is not in the Standard Industrial Classification (SIC) included in this reporting requirement.
	This facility did not <b>manufacture</b> or <b>process</b> an aggregate of 25,000 pounds of a subject chemical during this reporting year.
	This facility did not <b>otherwise use</b> an aggregate of 10,000 pounds of a subject chemical during this reporting year.
	This facility has fewer than 10 full time or full time equivalent employees.

Check	one:
	We would like to be removed from your mailing list. We will contact the State Emergency Response Commission should conditions at the facility change.
	We would like to remain on the mailing list and continue to receive information for the Emergency Planning and Community Right-to-Know Act requirements.
Sincer	ely,
(Facility owner/operator or officially designated representative)	
(Title)	
copy:	(County ) Local Emergency Planning Committee via the County Emergency Management Agency (City/Town) Fire Department File